

INITIAL PLEADING COVER SHEET**HOUSING APPEALS COMMITTEE**

(PER 760 CMR 56.00)

Developer/Applicant (Name/Address):	Chairman/Zoning Board (Name/Address):
Developer/Applicant's Attorney (Name/Address/Phone/Fax/Email):	Zoning Board's Attorney (Name/Address/Phone/Fax/Email):

Project Name: _____

Address: _____

Type of Development: Rental _____ Ownership _____ Mixed _____

Funding Agency/Program: _____

Site Approval/Project Eligibility: Yes _____ No _____ Date: _____

Total No. Units Appealed to H.A.C.: _____ No. Affordable (subsidized) Units: _____

ZBA Decision: Denial _____ Grant With Conditions _____

Date ZBA Decision Filed With Municipal Clerk: _____

Comments: _____

Developer's Attorney's Signature and Date

FOR DOCKET CLERK USE ONLY

Standard Fee Amount: \$ _____

Full Standard Fee enclosed
with Initial Pleading? _____ Yes _____ NoMotion on Fee enclosed
with Initial Pleading? _____ Yes _____ NoMinimum Fee of \$1,500 enclosed
with Initial Pleading? _____ Yes _____ No

Docket #: _____ Case #: _____

Motion on Fee: _____ Granted _____ Denied

on (date) _____

Additional Fee beyond \$1,500 Minimum
Fee paid as per Ruling on Motion on Fee:

amount: \$ _____

on (date): _____

HAC Appeal Date: _____